

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Mississippi Conservatives			FEC IDENTIFICATION NUMBER ▼ C C00554774		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee Winning Edge			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 22 / 2014		
Mailing Address PO Box 269			Amount 64703.26		
City Alexandria	State AL	Zip Code 36250	Transaction ID : SE.4338		
Purpose of Expenditure Mail Printing, Production and Postage		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 22 / 2014		
Name of Federal Candidate Mr. Christopher Brian McDaniel		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS		
Calendar Year-To-Date Per Election for Office Sought		1133897.25	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Winning Edge			Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 22 / 2014		
Mailing Address PO Box 269			Amount 27794.31		
City Alexandria	State AL	Zip Code 36250	Transaction ID : SE.4339		
Purpose of Expenditure Mail Printing, Production and Postage		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 05 / 22 / 2014		
Name of Federal Candidate Mr. Christopher Brian McDaniel		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MS		
Calendar Year-To-Date Per Election for Office Sought		1161691.56	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			92497.57		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			92497.57		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Mr. Brian Perry</i>		[Electronically Filed]		Date MM / DD / YYYY 05 / 22 / 2014	